

303 750

## Work Order ID 90323

\*90323\*

Page 1

September-17-12 10:37:30 AM

Item ID: D2745

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Bushing

Start Date: 9/17/12 Start Qty: 60.00

\*60\*

Cust Item ID:

Required Date: 10/05/12 Req'd Qty: 60.00

\*60\*

Customer:

Reference:

Approvals: Process Plan: MLJ Date: 12-09-18

Tooling:

Date:

Run Start \*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

D2745

Rev B

100

0.00

\*100\*

Hardinge CNC LATHE SMALL

Hardinge

Memo

0.00

Hardinge CNC Lathe Small

1-Turn as per Dwg D25152-Deburr

12/11/17

60

0

110

0.00

\*110\*

QC2- Inspect parts off machine FAI/FAIB

QC

Memo

0.00

Quality Control

12/11/17

60

0

120

0.00

\*120\*

QC8- Inspect parts - second check

QC

Memo

0.00

Quality Control

12/11/18

60

0

DAS  
08  
08

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																								
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>																								
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Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																									
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector																		
Doc/Data <input type="checkbox"/>																											
Equip/Tooling <input type="checkbox"/>																											
Operator <input type="checkbox"/>																											
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Process <input type="checkbox"/>																											
Supplier <input type="checkbox"/>																											
Training <input type="checkbox"/>																											
Unapproved <input type="checkbox"/>																											

FAULT CATEGORY			
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other

# Work Order ID 90323

September-17-12 10:37:30 AM

**\*90323\***

Page 2

Item ID: D2745      Accept      **\*N900040100\***      Setup Start **\*NS1\***  
 Revision ID:      Stop **\*NS2\***  
 Item Name: Bushing  
 Start Date: 9/17/12      Start Qty: 60.00      **\*60\***      Cust Item ID:  
 Required Date: 10/05/12      Req'd Qty: 60.00      **\*60\***      Customer:  
 Reference:

Approvals:      Process Plan:      Date:      Tooling:      Date:      Run Start **\*NR1\***  
 QC:      Date:      SPC (Y/N):      Date:      Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Identify as per dwg & Stock Location: <i>ST</i>	0.00							
<b>*130*</b>									
Packaging	Memo	0.00							
Packaging									
140	QC21- Final Inspection - Work Order Release	0.00							
<b>*140*</b>									
QC	Memo	0.00							
Quality Control									

*10/24/12 (60)*

*12/11/12*

*MFE  
12-11-19*

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  <div style="display: flex; justify-content: space-around;"> <div> <input type="checkbox"/> Rework  <input type="checkbox"/> Scrap  <input type="checkbox"/> Use-as-is  <input type="checkbox"/> Work Order Update         </div> <div> <input type="checkbox"/> Skid-tube  <input type="checkbox"/> Machining  <input type="checkbox"/> Thermoforming  <input type="checkbox"/> Large Fab         </div> <div> <input type="checkbox"/> Crosstube  <input type="checkbox"/> Small Fab  <input type="checkbox"/> Finishing  <input type="checkbox"/> Composite         </div> <div> <input type="checkbox"/> Water Jet  <input type="checkbox"/> Prod. Eng. Coord.  <input type="checkbox"/> Rec/Store/Packaging  <input type="checkbox"/> Supplier         </div> <div> <input type="checkbox"/> Engineering  <input type="checkbox"/> Quality  <input type="checkbox"/> Other         </div> </div>	
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# Picklist Print

September-17-12 10:37:29 AM

Page 1

Work Order ID: 90323

Parent Item: D2745

Parent Item Name: Bushing

Start Date: 9/17/12

Required Date: 10/05/12

Start Qty: 60.00

Required Qty: 60.00

Comments: IPP C02.03.07Update to turn in houseNG  
IPP Rev:D 07-10-23 Removed tumbling JLM Verified By:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M303R0.750		Purchased	No			100	f	519.1985	0.0959	6.056844			
303 Round Bar 0.750										5.850		12/11/17	

Location	Loc Qty	Loc Code
MAT028	519.1985	
117328	13.242	
117798	4.004	
118509	4.08	
119346	0.645	
120145	10.566	
121070	1.1	
121157	0.187	
122166	0.83	
122386	8.5445	
122734	476	

5.850

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

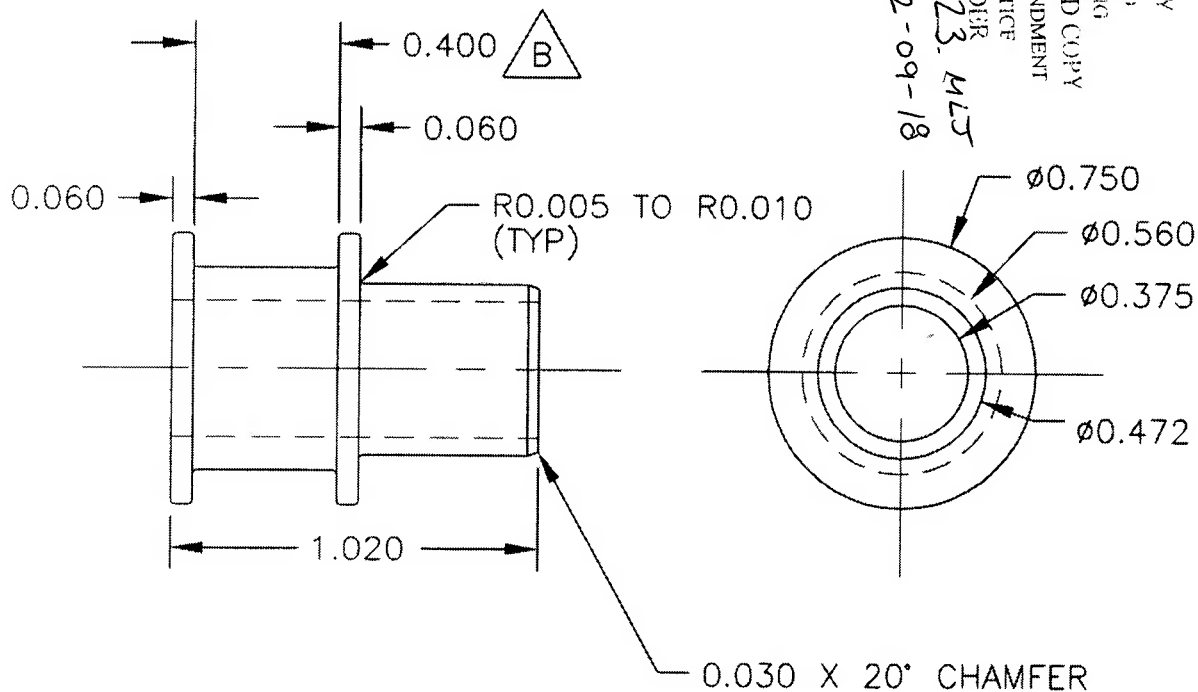
Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  <div style="display: flex; justify-content: space-between;"> <div> Rework <input type="checkbox"/>  Scrap <input type="checkbox"/>  Use-as-is <input type="checkbox"/>  Work Order Update <input type="checkbox"/> </div> <div> Skid-tube <input type="checkbox"/>  Machining <input type="checkbox"/>  Thermoforming <input type="checkbox"/>  Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/>  Small Fab <input type="checkbox"/>  Finishing <input type="checkbox"/>  Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/>  Prod. Eng. Coord. <input type="checkbox"/>  Rec/Store/Packaging <input type="checkbox"/>  Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/>  Quality <input type="checkbox"/>  Other <input type="checkbox"/> </div> </div>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/>  Machining <input type="checkbox"/>  Thermoforming <input type="checkbox"/>  Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/>  Small Fab <input type="checkbox"/>  Finishing <input type="checkbox"/>  Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/>  Prod. Eng. Coord. <input type="checkbox"/>  Rec/Store/Packaging <input type="checkbox"/>  Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/>  Quality <input type="checkbox"/>  Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
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<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <b>Landing Gear</b>  <input type="checkbox"/> Bending  <input type="checkbox"/> Centre Not Concentric to O/S  <input type="checkbox"/> Cracks  <input type="checkbox"/> Crushed/Crimped  <input type="checkbox"/> Cuffs  <input type="checkbox"/> Heat Treat  <input type="checkbox"/> Inspection Strip in Tube  <input type="checkbox"/> Ripples in Bend  <input type="checkbox"/> Torque Waves in Extrusion  <input type="checkbox"/> Turning Sequence  <input type="checkbox"/> Wave/Twist in Tube         </div> <div style="width: 30%;"> <b>General</b>  <input type="checkbox"/> Bend  <input type="checkbox"/> BOM/Route  <input type="checkbox"/> Broken/Damaged  <input type="checkbox"/> Burrs  <input type="checkbox"/> Contamination  <input type="checkbox"/> Countersink  <input type="checkbox"/> Cut Too Short  <input type="checkbox"/> Drill Holes  <input type="checkbox"/> Drawing  <input type="checkbox"/> Finish  <input type="checkbox"/> Folio         </div> <div style="width: 30%;"> <input type="checkbox"/> Grain  <input type="checkbox"/> Hardware  <input type="checkbox"/> Inspection Incomplete  <input type="checkbox"/> Instructions Incomplete/Unclear  <input type="checkbox"/> Maintenance  <input type="checkbox"/> Mislabeled  <input type="checkbox"/> Misread  <input type="checkbox"/> Offset  <input type="checkbox"/> Out of Calibration  <input type="checkbox"/> Out of Sequence  <input type="checkbox"/> Outside Dimensions         </div> <div style="width: 30%;"> <input type="checkbox"/> Ovalized  <input type="checkbox"/> Over/Under tolerance  <input type="checkbox"/> Part Incorrect  <input type="checkbox"/> Part Lost/Missing  <input type="checkbox"/> Part Moved  <input type="checkbox"/> Positioned Wrong  <input type="checkbox"/> Power Loss/Surge    <input type="checkbox"/> Pressure/Forced  <input type="checkbox"/> Temperature/Cure  <input type="checkbox"/> Weld  <input type="checkbox"/> Wrong Stock Pulled    <input type="checkbox"/> Other         </div> </div>											





DESIGN #A	DRAWN BY CP	DART AEROSPACE USA, INC. FAIRCHILD INTERNATIONAL AIRPORT, WA	
CHECKED DAA	APPROVED KE	DRAWING NO. D2745	REV. B SHEET 1 OF 1
DATE 98.10.23		TITLE BUSHING	SCALE 2:1
A	98.04.16	NEW ISSUE	
B	98.10.23	DIM 0.400 WAS 0.380	

RELEASED  
98.11.03 DS



MATERIAL: AISI 303 STAINLESS STEEL

NOTES: TOLERANCES ARE PER DART QSI.018 UNLESS OTHERWISE NOTED  
RADIUS ALL INSIDE EDGES 0.005 TO 0.010  
BREAK ALL UNMARKED SHARP EDGES 0.010 TO 0.020  
ALL DIMENSIONS ARE IN INCHES